



RURAL HEALTH ADVISORY COMMISSION

NEBRASKA OFFICE OF RURAL HEALTH

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**Minutes of the
RURAL HEALTH ADVISORY COMMISSION
Friday, June 21, 2013
1:30 – 4:00 p.m.
220 S. 17th Street; Conference Room LL-A
Lincoln, Nebraska**

Members Present: Scot Adams, Ph.D.; Kathy Boswell; Marty Fattig, C.E.O.; Mark Goodman, M.D.; Mary Kent; Shawn Kralik, D.D.S.; Jenifer Roberts-Johnson, J.D.; Avery Sides, M.D.; Rebecca Schroeder Ph.D.; Sharon Vandegrift, R.N.; Roger Wells, PA-C

Members Excused: Brian Buhlke, D.O.; Michael Sitorius, M.D.

Office of Rural Health Staff Present: Marlene Janssen, Dave Palm, Tom Rauner, Deb Stoltenberg

Guests: Bruce Rieker, Nebraska Hospital Association

1. Call Meeting to Order; Open Meetings Act & Agenda Posted; Adopt Agenda; Approve Minutes of March 15, 2013, Meeting; Introduce Members and Guests.

Chairman Marty Fattig called the meeting to order at 1:40 p.m. with the following members present: Scot Adams, Ph.D.; Kathy Boswell; Marty Fattig, C.E.O.; Mark Goodman, M.D.; Mary Kent; Shawn Kralik, D.D.S.; Jenifer Roberts-Johnson, J.D.; Rebecca Schroeder, Ph.D.; Avery Sides, M.D.; Sharon Vandegrift, R.N.; Roger Wells, PA-C.

Marty Fattig announced that the Open Meetings Act and Agenda are posted by the door.

Dr. Mark Goodman moved to approve the agenda with the following change: add to Closed Session a request from a student loan recipient. Roger Wells seconded the motion. Motion Carried. YES: Adams, Boswell, Fattig, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

Roger Wells moved to approve the March 15, 2013, RHAC meeting minutes with the following correction: omit the last sentence in paragraph 6 under “4. Federal & State Legislation” and add, “*This will affect the State Offices of Rural Health, Flex, and SHIP grants along with other federal grants DHHS receives.*” Scot Adams seconded the motion. Motion Carried. YES: Adams, Boswell, Fattig, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

2. Administrative Announcements

- **Next Meeting: Thursday, September 19, 2013, Kearney, NE; 6:00 p.m.**
- **RHAC Member's Terms Ending September 30, 2013**
- **Other**

Marty Fattig announced that the next Rural Health Advisory Commission meeting will be in Kearney, Nebraska on Thursday, September 19, 2013, beginning at 6:00 p.m. This is the annual dinner meeting in conjunction with the Nebraska Rural Health Conference which is September 18-19. Mr. Fattig stated that there will be some outstanding speakers at the conference and encouraged commission members to attend.

Marty Fattig announced that the following commission members' terms expire September 30, 2013, and the Governor's Office is accepting applications for re-appointments or new appointments: Marty Fattig, *rural hospital administrator*; Dr. Shawn Kralik, *rural dentist*; Sharon Vandegrift, *rural nurse*; and Kate Boswell, *rural consumer*.

In other announcements, Mr. Fattig reported that commission member, Roger Wells, is the 2013 recipient of the University of Nebraska Medical Center, Physician Assistant Alumni Charter, Distinguished Alumnus Award.

3. 3-Year Statewide Review of State-Designate Shortage Areas

- **Public Comment Period Ends July 1, 2013**
- **Corrections made as appropriate**
- **Discuss Comments Received To-Date**
- **Review CHC Requests**

Marlene Janssen reviewed the comments received to-date about the proposed state-designated shortage areas. Data was corrected for Boyd, Cedar, and Dakota Counties but these changes did not affect the shortage area status of these counties. Ms. Janssen explained the concept of "full-employment capacity" for a county with less than the minimum population base for a full-time health professional. This is the situation in Knox County for general surgery and Knox County does qualify as a general surgery shortage area based on the full-employment capacity guideline.

Marlene Janssen read the following excerpt from an email from Richard D. Nation, C.E.O., Blue Valley Community Action Partnership:

"Thank you for sharing the State Designated Shortage Area documentation with me. I believe the Commission staff members have done an excellent job of putting together the demographics to justify the state shortage areas.

However, I wonder if it is as relevant as it should be, based on whether providers in the areas not so designated will accept Medicaid reimbursement payments and new Medicaid patients. Having access should include whether current providers are willing to accept new Medicaid patients. If no one is willing to serve you because of your income or insurance carrier, then is an area really without a shortage?"

Dr. Rebecca Schroeder stated she had this very discussion with a dentist recently. Ms. Janssen reported that she brought up this concern at a meeting with the Health Professions Tracking

Services (HPTS). Currently HPTS collects a *description* of the provider's patient base by method of payment. However, this does not tell us if the provider is accepting *new* Medicare, Medicaid, and/or charity cases.

Sharon Vandegrift added that Mr. Nation makes a very good point. There was a discussion about whether an established patient, once they go on Medicare, will the physician still accept that patient?

Marlene Janssen reported that other comments were received concerning an interpretation of the guidelines. These concerns did not impact the shortage area designations.

Ms. Janssen reported that HPTS is completing the health professionals' survey for Occupational Therapists (OT) and Physical Therapists (PT) and is beginning the facilities' survey for OTs and PTs this summer.

Marty Fattig called for a motion to approve the state-designated shortage areas. Dr. Scot Adams moved to approve the 2013 state-designated shortage areas effective July 2, 2013, with the following additions:

- Valley County – Family Practice

- Adams County – Psychiatry/mental health

- Jefferson County – Family Practice

- Knox County – General Surgery (based on full-employment capacity)

- Thayer County – Family Practice

- Good Neighbor CHC (Norfolk) – Family Practice and General Dentistry

- People's Health Center (Lincoln) – Family Practice and General Dentistry

- Community Action Partnership of Western Nebraska – Family Practice and General Dentistry

One World CHC (Omaha) – Family Practice and General Dentistry; and the Office of Rural Health is instructed to make any other necessary changes to the shortage areas based on verified data received during the Public Comment Period which ends July 1, 2013. Rebecca Schroeder seconded the motion. Motion Carried. YES: Adams, Boswell, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

4. Federal & State Legislation

Marty Fattig reported that the Legislature showed great support for the rural incentive programs. LB 20 was introduced which would increase the appropriation for the rural incentive programs by \$600,000 per year. Ultimately, provisions from LB 20 were amended into LB 195, the state appropriation bill, resulting in an *additional* appropriation of \$500,000 for the rural incentive programs.

LB 577 is the Medicaid Expansion bill. Due to filibuster efforts, this bill never came to a vote.

LR 22 is a legislative resolution introduced by Senators Kathy Campbell and Mike Gloor to develop policy recommendations towards transformation of Nebraska's health care system including Medicaid and medical homes. Mr. Fattig stated that in his communication with Senators Campbell and Gloor, he requested that representation from rural providers be included and considered.

There is also a legislative resolution (LR 155) to study Nebraska's tax structure. This resolution creates the Tax Modernization Committee. The final report of the Tax Modernization Committee is due to the Governor no later than December 15, 2013.

On the federal level, Marty Fattig reported that the physician supervision issue is still a concern for rural hospitals and determining what outpatient therapeutic procedures can be done without direct physician supervision. These same therapeutic procedures can be done as in-patient procedures with general physician supervision.

Physician payment under Medicare is an ongoing issue. The question is: will Congress fix the problem or "kick it down the road" again?

Marty Fattig briefly touched on changes due to the Affordable Care Act including Disproportionate Share Hospital (DSH) payment cuts, Medicaid expansion, and Exchanges (marketplaces). The Debt Reduction Act is in place and will affect Critical Access Hospitals (CAHs). Payments will be reduced from 101 percent to 100 percent; CAHs cannot be less than 10 miles apart; and nationally there will be CAH closures. Mr. Fattig stated that Nebraska's CAHs should not be affected by the 10-mile rule.

Regarding "Meaningful Use" (electronic health records), Mr. Fattig reported that many entities are in Year 2, Stage 1. Stage 2 begins October 1, 2013, for hospitals and January 1, 2014, for eligible providers. Some of the big items under Stage 2 include Patient Portal; which allows the patient electronic access to his/her medical records, electronic reporting of Public Health Measures, and Health Information Exchange connection.

Mr. Fattig reported that CAH's CRNA (Certified Registered Nurse Anesthetist) On-Call time will no longer be paid through the Centers for Medicare and Medicaid Services (CMS) due to an interpretation of rules and regulations. This will require hospitals to change how they write their contracts.

Recovery Audit Contracts (RAC) audits are contracts through CMS to private contractors to audit Medicare and Medicaid payments to providers. RAC contractors receive a percentage of what they recover. The problem is that RAC denies a lot of claims and hospitals must defend those claims. One of the most frequent findings is "one day stays." RAC has decided that one day stays did not need to happen and the hospital, if they agree with the finding, is not allowed to rebill the claim. The American Hospital Association has filed a lawsuit because of the economic impact these audits have on hospitals and defending the payments. Roger Wells added that RAC tends to be overzealous with their findings hoping the hospital will not dispute the finding. Marty Fattig stated that RAC also says they will look for under-billed claims and help the hospitals receive the full benefit but this rarely happens. The main issue on one day stays is that RAC has the advantage of the end result while the emergency room physician does not.

5. Program 175 Rural Incentive Programs

- **Program Committee to review all RHAC Guidelines**
- **Review Budget**
- **Accounts Receivable**

Marty Fattig explained that over the past years commission members were assigned to two committees; the Program Committee and the Policy Committee. The Program Committee

generally met only a couple of times each year to discuss program issues related to the rural incentive programs. The Policy Committee met more frequently to discuss and develop rural health policy recommendations. Late last year, the rural health policy recommendations were completed by assigning each commission member one of the topics. Each commission member then submitted a written discussion and recommendations for that topic. It was the consensus of the members at that time not to have specific committees but to ask for volunteers to work on projects as needed.

Mr. Fattig reported that one such project he and Marlene Janssen discussed was to have three or four members volunteer to review all of the guidelines the commission has approved over the past 15 years starting with the OT and PT shortage area guidelines. This project group would report back to the full commission for approval of the new guidelines. After some discussion, the following people volunteered: Dr. Avery Sides, Roger Wells, Mary Kent, and Marty Fattig. Marlene Janssen stated she will contact those people as time allows to review specific guidelines.

Marlene Janssen reviewed the Program 175 budget for the next biennium (FY2013-2015). The general fund allocation for each of the next two years is \$637,086. General funds are used for the state match for loan repayment. The cash spending authority appropriation for each of the next two year is \$2,166,815. This includes the \$500,000 from the Health and Human Services Cash Fund transfer to the Rural Health Incentive Cash Fund. Ms. Janssen pointed out that in order to use the cash spending authority, cash must be available in the cash fund.

In reviewing the FY2013-14 budget, Ms. Janssen reported that the state match for the current loan repayment contracts is over \$700,000. This means all of the general funds plus approximately \$101,000 in cash funds are being used to fund current loan repayment contracts. Any new loan repayment awards will require cash funds for the state match. Student loans are also paid with cash funds.

Marlene Janssen reported on the following accounts receivable:

Student Loan Update (Contract Buyout and Defaults)

Ryan Boyd, dental student – *paid-in-full*

Tamara Kenning, LMHP – defaulting, payments current

Tracy Pella, LMHP – defaulting effective April 1, 2013, payments current

Tom Pratt, D.D.S. – current (left shortage area)

Kimberly Salber, P.A. – *paid-in-full*

Andria Simons, med student – DHHS Legal Services working on collecting

Nick Woodward, D.D.S. Ped – current (left Nebraska after graduating)

Loan Repayment (Defaults – left shortage area for non-shortage area or left Nebraska)

Michelle Dickes, O.T. – *paid-in-full*

Ashley Gunderson, P.A. – leaving Aurora to practice in Lincoln, default 7/1/2013

Joseph Kezeor, M.D. – current

Amanda Whitenack, APRN – *paid-in-full*

6. CLOSED SESSION

- **Student Loan Recipient Request**
- **Student Loan Applications**
 - **New**
 - **Continuation**
- **Loan Repayment Applications**

Mark Goodman moved to go to closed session at 2:53 p.m. to discuss a student loan recipient request, student loan applications (new and continuation), and loan repayment applications. Roger Wells seconded the motion. Motion carried. YES: Adams, Boswell, Fattig, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

Marty Fattig announced that the commission would go into Closed Session at 2:53 p.m. to discuss a student loan recipient request, student loan applications (new and continuation), and loan repayment applications.

7. OPEN SESSION

- **Motion(s) on Closed Session Discussions**

Scot Adams moved to go to Open Session at 3:14 p.m. Dr. Mark Goodman seconded the motion. Motion carried. YES: Adams, Boswell, Fattig, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

Rebecca Schroeder moved to acknowledge student loan recipient, Anitra Warrior's graduation date change due to not matching through Phase II of the internship process. Ms. Warrior's graduation date will be in 2015 at the earliest. Mark Goodman seconded the motion. Motion carried. YES: Adams, Boswell, Fattig, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

Rebecca Schroeder moved to approve the following new and continuation student loan applications at the maximum amounts allowed:

2013 Student Loan Applicants	
Student Name	Status
Badertscher, Lindsey PA	New
Borrenpohl, Jessica PA	New
Dye, Emory MED	New
Kindred, Erin MED	New
Koll, Kelsey PA	New
Olsen, Alyssa PA	Cont
Peterson, Danika MED	New
Peterson, Jacob MED	New
Powell, Michael MED	Cont
Sackschewsky, Melissa DENT	New
Schomp, Josey PA	New
Seeger, David DENT	Cont
Shane, Amelia PA	New
Sukup, Sonya MH	New
Thiele, Katelyn PA	New
Warrior, Anitra PhD	New

Mark Goodman seconded the motion. Motion carried. YES: Adams, Boswell, Fattig, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

Rebecca Schroeder moved to approve the following loan repayment applications with estimated loan repayment start dates and amounts as indicated or as determined by Office of Rural Health staff based on issuance of license or loan documentation:

Applicant's Name	Est. LR Start Date	Specialty	County (Community)	Est. Total Loan Repayment Amount
Brown, Marshall Keith	07/01/2013	D.O. (FP)	Burt County (Oakland)	\$91,074
Stanton, Jennifer	07/01/2013	P.A. (FP)	Polk County (Osceola)	\$60,000
Gawrych, Richard	07/01/2013	PharmD	Howard County (St. Paul)	\$60,000
Mosel, Melissa (0.6 FTE)	08/01/2013	M.D. (PED)	Lincoln County (North Platte)	\$72,000
Storm, Christy (Boulos)	07/01/2013	NP (FP)	Douglas County (Charles Drew CHC)	\$60,000
Nitsch (Huston), Madison 0.75 FTE PEND LIC	09/01/2013	O.T.	Dawes (Chadron) and Sioux Counties	\$45,000
Schapmann, Adam	07/01/2013	P.A. (FP)	Cedar (Hartington), Pierce, & Knox	\$60,000
Fisher, Cora 0.9 FTE	07/01/2013	NP (IMS)	Lincoln County (North Platte)	\$54,000
Minnick, Kyle	07/01/2013	P.T.	Harlan County (Alma)	\$60,000
Law, Melissa	08/01/2013	M.D. (Ped)	Hall County (Grand Island)	\$120,000
Law, Joseph	09/01/2013	M.D. (Ped)	Hall County (Grand Island)	\$120,000
Pierce, Stephani LR amount set by local entity	07/01/2013	O.T.	Holt County (O'Neill)	\$30,000
Carty, Maria	07/01/2013	DMD	Cherry County (Valentine)	\$120,000
Peterson, Steven	07/01/2013	P.A. (FP)	Pierce County (Plainview)	\$33,468
Bergen, Heidi 0.5 FTE	07/01/2013	NP (FP)	Clay County (Edgar)	\$25,106
Hofman, Carol PENDING Loan Documents	07/01/2013	NP (FP)	Dundy (Benkelman)/Hitchcock	\$31,627
Haynes, Colby PENDING LICENSE	07/01/2013	PharmD	Johnson County (Tecumseh)	\$60,000
Mucklow, Greg	07/01/2013	LMHP	Adams (Hastings), Clay, Nuckolls	\$60,000
Bader, Sarah PENDING LICENSE	08/01/2013	O.T.	Phelps County (Holdrege)	\$52,340
Reimer, Nikolas	07/01/2013	PharmD	Nance County (Fullerton)	\$30,000
Belgun, Todd PENDING LICENSE	07/01/2013	PharmD	Knox County (Creighton)	\$60,000
Anderson, Marcus PENDING LICENSE	07/01/2013	PharmD	Furnas County (Cambridge)	\$60,000

and move the following loan repayment applications to the waiting list:

Applicant's Name	Estimated LR Start Date	Specialty	County (Community)
Barstow, Amanda PENDING LICENSE	02/01/2014	O.T.	Cherry County (Valentine)
Peterson, Kaitlyn SL OBL ENDS approx. 6/30/14	07/01/2014	P.A. (IMS)	Buffalo County (Kearney)
Moss, Wayne PENDING LICENSE	08/01/2014	M.D. (Psy)	Lincoln County (North Platte)

Mark Goodman seconded the motion. Motion carried. YES: Adams, Boswell, Fattig, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

8. Primary Care Office

- Governor-Designated Eligible Areas for Medicare Certified Rural Health Clinics
- Other

Tom Rauner reported on the “Governor-Designated Eligible Shortage Areas” are determined. Certified Rural Health Clinics must be located in federally-designated shortage areas. These federally-designated shortage areas can be defined at the state level and are called “Governor-Designated Eligible Areas for Medicare Certified Rural Health Clinics.” Mr. Rauner stated that he uses the Rural Health Advisory Commission’s state-designated family practice shortage guidelines and shortage areas with a couple of changes. Since the commission’s state-designated shortage areas are reviewed every 3 years, the “Governor-Designated” areas are also updated every 3 years.

Nebraska is unique in that we have a governor-appointed Rural Health Advisory Commission. Mr. Rauner stated that he is requesting a motion from the commission to approve the draft guidelines for “Governor-Designated Rural Health Clinic Eligible Areas.”

After a brief discussion, Mark Goodman moved to approve the Guidelines for Governor-Designated Rural Health Clinic Eligible Areas submitted by the Primary Care Office. Rebecca Schroeder seconded the motion. Motion carried. Yes: Adams, Boswell, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.

9. Other Business

Roger Wells stated that the Nebraska Workforce 2020 Project Report will be emailed to RHAC members. In summary, Mr. Wells reported that a website has been established and funding sources are being sought. The Nebraska Healthcare Workforce is an independent group compiling information on health care reports and linking to them from the workforce website. This project was started in 2010 and is coming to fruition.

Dave Palm reported that the College of Public Health, Health Policy Center issued an excellent report on the current and future supply of dentists. The Office of Rural Health will send commission members a link to the report. Dave Palm also stated that the Office of Rural Health is working with UNMC to develop projects on the supply of family practice physicians, physician assistants and nurse practitioners.

10. Adjourn

Mark Goodman moved to adjourn at 3:16 p.m. No second is necessary. Motion carried. YES: Adams, Boswell, Goodman, Kent, Kralik, Roberts-Johnson, Schroeder, Sides, Vandegrift, Wells; NO: None; Excused: Buhlke, Sitorius.